Case 3:11-bk-08356-JAF Doc 1 Filed 11/16/11 Page 1 of 58

B1 (Official Form 1)(4/		United S			ruptcy f Florida					Vo	luntary Petition
· ·	Name of Debtor (if individual, enter Last, First, Middle): Myer, Gary William							ebtor (Spouse sa Michell		, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							used by the J maiden, and			8 years	
Last four digits of Soc. (if more than one, state all)	Sec. or Indi	vidual-Taxpa	yer I.D. (ITIN) No./0	Complete El		our digits o than one, state	all)	Individual-	Гахрауег I	.D. (ITIN) No./Complete EIN
Street Address of Debto 2939 Biloxi Trail Middleburg, FL	or (No. and	Street, City, a	nd State)	_	ZIP Code	293 Mic	Address of 9 Biloxi Idleburg		(No. and St	reet, City, a	ZIP Code
County of Residence or Clay	of the Princ	cipal Place of	Business		32068	Count	•	ence or of the	Principal Pla	ace of Bus	32068 iness:
Mailing Address of Deb	otor (if diffe	rent from stre	eet addres	ss):	ZIP Code		ng Address	of Joint Debt	or (if differe	nt from str	eet address): ZIP Code
Location of Principal As (if different from street a											
(Form of O	ge 2 of this es LLC and one of the al	form. LLP) bove entities,	Sing in I Rail Stoc	(Check Ith Care Bu gle Asset Re 1 U.S.C. § 1 oad ekbroker modity Bro uring Bank er Tax-Exe (Check box tor is a tax-	eal Estate as 101 (51B) bker mpt Entity if applicable	the Petition is the Petition is Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 Part Entity ff applicable) tempt organization The Petition is The Petition is The Petition is Chapter 7 Chapter 9 Chapter 11 Chapter 12 Debts are primarily consumer debto defined in 11 U.S.C. § 101(8) as			Petition is Fi	hapter 15 H a Foreign hapter 15 H a Foreign e of Debts k one box)	cone box) Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding
Fill Filing Fee attached Filing Fee to be paid in attach signed application debtor is unable to pay Form 3A. Filing Fee waiver requiattach signed application	d installments on for the course fee except in ested (applica	art's considerati n installments. I	individual on certifyi Rule 1006(7 individu	s only). Must ng that the b). See Offic als only). Mu	ial Check is Check is BB.	one box: Debtor is a si Debtor is not if: Debtor's agg re less than all applicable A plan is bein Acceptances	mall business a small busi regate nonco \$2,343,300 (e boxes: ng filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	ter 11 Debt ned in 11 U.S. defined in 11 U ated debts (exc to adjustment	ors C. § 101(51) J.S.C. § 101 cluding debt on 4/01/13	
Statistical/Administrat ■ Debtor estimates tha □ Debtor estimates tha there will be no fund	t funds will it, after any	be available exempt prop	erty is ex	cluded and	administrati		es paid,		THIS	SPACE IS	FOR COURT USE ONLY
Estimated Number of Co	reditors 100- 199	200-] 1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				
Estimated Liabilities	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

Case 3:11-bk-08356-JAF Doc 1 Filed 11/16/11 Page 2 of 58

B1 (Official For	rm 1)(4/10)	_	Page 2				
Voluntar	y Petition	Name of Debtor(s): Myer, Gary William					
(This page mu	ust be completed and filed in every case)	Myer, Melissa Michelle					
1 0	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than two,	attach additional sheet)				
Location Where Filed:	- None -	Case Number:	Date Filed:				
Location Where Filed:		Case Number:	Date Filed:				
Pe	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If	more than one, attach additional sheet)				
Name of Debt - None -	tor:	Case Number:	Date Filed:				
District:		Relationship:	Judge:				
	Exhibit A	(To be completed if debtonic	Exhibit B				
forms 10K a	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.)	I, the attorney for the petitione have informed the petitione 12, or 13 of title 11, United	on individual whose debts are primarily consumer debts.) oner named in the foregoing petition, declare that I rethat [he or she] may proceed under chapter 7, 11, States Code, and have explained the relief available further certify that I delivered to the debtor the notice (b).				
☐ Exhibit	A is attached and made a part of this petition.	X /s/ John J. Freem Signature of Attorney fo John J. Freeman	or Debtor(s) (Date)				
	Ext	nibit C					
	or own or have possession of any property that poses or is alleged to I Exhibit C is attached and made a part of this petition.	pose a threat of imminent and	identifiable harm to public health or safety?				
	Ext	nibit D					
_	eleted by every individual debtor. If a joint petition is filed, ea	-	nd attach a separate Exhibit D.)				
If this is a join	D completed and signed by the debtor is attached and made int petition:	a part of this petition.					
_	D also completed and signed by the joint debtor is attached a	and made a part of this petiti	on.				
	Information Regardin	_					
	(Check any ap Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or princ	cipal assets in this District for 180				
	Certification by a Debtor Who Reside (Check all app		al Property				
	Landlord has a judgment against the debtor for possession		x checked, complete the following.)				
	(Name of landlord that obtained judgment)						
	(Address of landlord)						
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment	for possession, after the judg	gment for possession was entered, and				
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	•					
	Debtor certifies that he/she has served the Landlord with t	his certification. (11 U.S.C.	§ 362(1)).				

B1 (Official Form 1)(4/10) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Gary William Myer

Signature of Debtor Gary William Myer

X /s/ Melissa Michelle Myer

Signature of Joint Debtor Melissa Michelle Myer

Telephone Number (If not represented by attorney)

November 16, 2011

Date

Signature of Attorney*

X /s/ John J. Freeman

Signature of Attorney for Debtor(s)

John J. Freeman 58618

Printed Name of Attorney for Debtor(s)

LaBella Law, P.L.

Firm Name

1665 Kingsley Avenue Suite 108

Orange Park, FL 32073

Address

Email: bk@labellalaw.com

904-541-1643 Fax: 904-621-9900

Telephone Number

November 16, 2011

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

$Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Myer, Gary William Myer, Melissa Michelle

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

_
v
- 7

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

T
v

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer Melissa Michelle Myer		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit cour	nseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for d	etermination by the court.]
1	109(h)(4) as impaired by reason of mental illness or
* · ·	lizing and making rational decisions with respect to
financial responsibilities.);	8
1 //	109(h)(4) as physically impaired to the extent of being
• • •	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military co	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Gary William Myer
	Gary William Myer
Date: November 16, 2	2011

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer Melissa Michelle Myer		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, o
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Melissa Michelle Myer
Melissa Michelle Myer
Date: November 16, 2011

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.

Page 2

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer,		Case No.	
	Melissa Michelle Myer			
-		Debtors	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	97,241.00		
B - Personal Property	Yes	5	26,268.24		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		182,452.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		2,586.45	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		51,240.81	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,598.42
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,557.65
Total Number of Sheets of ALL Schedu	ıles	24			
	To	otal Assets	123,509.24		
		1	Total Liabilities	236,279.26	

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer,		Case No.	
	Melissa Michelle Myer			
_		Debtors	Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	2,586.45
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	2,586.45

State the following:

Average Income (from Schedule I, Line 16)	5,598.42
Average Expenses (from Schedule J, Line 18)	4,557.65
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	7,628.11

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		77,711.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	2,586.45	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		51,240.81
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		128,951.81

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B6A (Official Form 6A) (12/07)

In re	Gary William Myer,	Case No.
	Melissa Michelle Myer	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Residence: Single Family Home Location: 2939 Biloxi Trail Middleburg, FL 32068		J	97,241.00	172,339.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **97,241.00** (Total of this page)

Total > **97,241.00**

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Gary William Myer,	Case No.
	Melissa Michelle Myer	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Х		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or	Checking Account: 9748 Location: Vystar Credit Union P.O. Box 45085 Jacksonville, FI 32232-5085	J	0.00
	cooperatives.	Checking Account: 3593 Location: Community First Credit Union P.O. Box 2600 Jacksonville, FI 32232	J	964.53
		Savings Account: 9741 Location: Vystar Credit Union P.O. Box 45085 Jacksonville, Fl 32232	J	5.00
		Savings Account: 6359 Location: Community First Credit Union P.O. Box 2600 Jacksonville, FI 32232	J	30.14
		Savings Account: 5401 Location: Vystar Credit Union P.O. Box 45085 Jacksonville, FI 32232	Н	5.00
		Savings Account: Child's savings account Location: Vystar Credit Union P.O. Box 45085 Jacksonville, Fl 32232	J	5.00

Sub-Total > 1,009.67
(Total of this page)

⁴ continuation sheets attached to the Schedule of Personal Property

In re	Gary William Myer,
	Melissa Michelle Myei

- Cube 110:

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N Description and Location E	of Property Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
	Savings Account: Child's account Location: Vystar Credit Union P.O. Box 45085 Jacksonville,FI 32232	J	5.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	x		
Household goods and furnishings, including audio, video, and computer equipment.	Furniture: 4 bedroom sets, 1 couch, chair, kitchen set. non-operable gra Location: 2939 Biloxi Trail Middlebu	ndfather clock.	750.00
	Appliances: microwave, refrigerator washer, washer and dryer, Location: 2939 Biloxi Trail Middlebu		800.00
	Household: pots and pans, dishes, q flatware, cutlery set, toaster over, Location: 2939 Biloxi Trail Middlebu		100.00
	Audio-Video: receiver, subwoofer, 4 television, 2 lcd televisions, 1 dvd playstation 3, xbox 360, WII console sound speakers, Playstation DSI. Location: 2939 Biloxi Trail Middlebu	layer, e, surround	750.00
	Office: 3 laptop computers, and 1 de Location: 2939 Biloxi Trail Middlebu	esk. J irg, FL 32068	400.00
 Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 	Collectibles: dreamcicles,	J	50.00
6. Wearing apparel.	Clothes: mens/womens clothing Location: 2939 Biloxi Trail Middlebu	J irg, FL 32068	160.00
7. Furs and jewelry.	Jewelry: engagement ring, wedding sterling bracelets and necklaces Location: 2939 Biloxi Trail Middlebu		750.00
 Firearms and sports, photographic, and other hobby equipment. 	Sports-Hobby: incline bench Location: 2939 Biloxi Trail Middlebu	J irg, FL 32068	50.00
 Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 	x		
		Sub-Tot	al > 3,815.00

Sheet <u>1</u> of <u>4</u> continuation sheets attached to the Schedule of Personal Property

In re	Gary William Myer,
	Melissa Michelle Mye

- Cube 110:

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

		(Continuation Sheet)		
Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	Х			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Locatio P.O. Bo	nent: Traditional IRA account on: Vystar Credit Union ox 45085 nville, FL	Н	55.46
	Locatio P.O. Bo	ines, IA	Н	3,106.25
	Locatio	nent: 401k Plan n: Lifetimes Connections x 78501 o, Fl	w	2,806.86
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	x			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
			Sub-Tota (Total of this page)	al > 5,968.57

(Total of this page)

Sheet **2** of **4** continuation sheets attached to the Schedule of Personal Property

In re	Gary William Myer,
	Melissa Michelle Myer

- Cube 110:

Debtors

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	х			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	х			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		Auto: 2001 c1500 LS Chevrolet Suburban, 165,000 miles vehicle is in rough to average condition. Location: 2939 Biloxi Trail Middleburg, FL 32068	0 J	3,850.00
			Auto: 2004 Pontiac Grand Prix GT1 vehicle is in rough condition with 110,000 miles. Location: 2939 Biloxi Trail Middleburg, FL 32068	J	4,125.00
			Auto: 2003 Ford Mustang GT. vehicle is in clean condition with 77,000 miles. Location: 2939 Biloxi Trail Middleburg, FL 32068	н	7,500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
			(То	Sub-Totatal of this page)	al > 15,475.00

Sheet <u>3</u> of <u>4</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Gary William Myer,
	Melissa Michelle Myer

Case No.		
Case INU.		

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 26,268.24 |

Sheet <u>4</u> of <u>4</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/10)

I	n	re
1	n	re

32232

(Check one box)

Gary William Myer, Melissa Michelle Myer

Debtor claims the exemptions to which debtor is entitled under:

Case No.
Case No.

☐ Check if debtor claims a homestead exemption that exceeds

\$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter

750.00

235.33

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

☐ 11 U.S.C. §522(b)(2) ■ 11 U.S.C. §522(b)(3) with respect to cases commenced on or after the date of adjustment.				
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption	
Real Property Residence: Single Family Home Location: 2939 Biloxi Trail Middleburg, FL 32068	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02	0.00	97,241.00	
Checking, Savings, or Other Financial Account Checking Account: 3593 Location: Community First Credit Union P.O. Box 2600 Jacksonville, FI 32232	s, Certificates of Deposit Fla. Const. art. X, § 4(a)(2)	964.53	964.53	
Savings Account: 9741 Location: Vystar Credit Union P.O. Box 45085 Jacksonville, FI 32232	Fla. Const. art. X, § 4(a)(2)	5.00	5.00	
Savings Account: 6359 Location: Community First Credit Union P.O. Box 2600 Jacksonville, FI 32232	Fla. Const. art. X, § 4(a)(2)	30.14	30.14	
Savings Account: 5401 Location: Vystar Credit Union P.O. Box 45085 Jacksonville, FI 32232	Fla. Const. art. X, § 4(a)(2)	5.00	5.00	
Savings Account: Child's savings account Location: Vystar Credit Union P.O. Box 45085 Jacksonville, FI 32232	Fla. Const. art. X, § 4(a)(2)	5.00	5.00	
Savings Account: Child's account Location: Vystar Credit Union P.O. Box 45085 Jacksonville FI	Fla. Const. art. X, § 4(a)(2)	5.00	5.00	

Fla. Const. art. X, § 4(a)(2)

Fla. Const. art. X, § 4(a)(2)

Household Goods and Furnishings

washer, washer and dryer,

Furniture: 4 bedroom sets, 1 couch, 1 love seat,

Appliances: microwave, refrigerator, stove, dish

Location: 2939 Biloxi Trail Middleburg, FL 32068

1 chair, kitchen set. non-operable grandfather Location: 2939 Biloxi Trail Middleburg, FL 32068 750.00

800.00

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/10) -- Cont.

In re	Gary William Myer,
	Melissa Michelle Myer

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Interests in IRA, ERISA, Keogh, or Other Pension of Retirement: Traditional IRA account Location: Vystar Credit Union P.O. Box 45085 Jacksonville, FL 32232	or Profit Sharing Plans Fla. Stat. Ann. § 222.21(2)	55.46	55.46
Retirement: 401k plan Location: Principal Financial Group P.O. Box 9394 Des Moines, IA 50306-9394	Fla. Stat. Ann. § 222.21(2)	3,106.25	3,106.25
Retirement: 401k Plan Location: Lifetimes Connections P.O. Box 78501 Orlando, Fl 32878	Fla. Stat. Ann. § 222.21(2)	2,806.86	2,806.86
Automobiles, Trucks, Trailers, and Other Vehicles Auto: 2004 Pontiac Grand Prix GT1 vehicle is in rough condition with 110,000 miles. Location: 2939 Biloxi Trail Middleburg, FL 32068	Fla. Stat. Ann. § 222.25(1)	2,000.00	4,125.00

Total: 9,968.57 109,899.24

B6D (Official Form 6D) (12/07)

In re	Gary William Myer,
	Melissa Michelle Myer

Case No.		

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	U-GD-D		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY	
Account No. 62062110803381001 Capital One Auto Finance 3905 N Dallas Pkwy Plano, TX 75093		н	Opened 1/01/08 Last Active 6/27/11 Auto: 2003 Ford Mustang GT. vehicle is in clean condition with 77,000 miles. Location: 2939 Biloxi Trail Middleburg, FL 32068	T	ATED		40.440.00	2040.00	
Account No. 7080260102009	+	+	Value \$ 7,500.00 Opened 10/01/07 Last Active 5/13/11			H	10,113.00	2,613.00	
Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701		н	Residence: Single Family Home Location: 2939 Biloxi Trail Middleburg, FL 32068						
			Value \$ 97,241.00				172,339.00	75,098.00	
Account No.			Value \$						
Account No.									
			Value \$						
continuation sheets attached			S (Total of th	ubt nis p			182,452.00	77,711.00	
	Total 182,452.00 77,711.00 (Report on Summary of Schedules)								

B6E (Official Form 6E) (4/10)

In re	Gary William Myer,	Case No.
	Melissa Michelle Myer	

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/10) - Cont.

In re	Gary William Myer,	Case No.	
	Melissa Michelle Myer		

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AMOUNT INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Income Tax Account No. Internal Revenue Service 0.00 PO Box 16236 Philadelphia, PA 19114-0236 2,586.45 2,586.45 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 2,586.45 2,586.45 Total 0.00 (Report on Summary of Schedules) 2,586.45 2,586.45 B6F (Official Form 6F) (12/07)

In re	Gary William Myer, Melissa Michelle Myer		Case No.	
		Debtors	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	IS SUBJECT TO SETOFF, SO STATE.	NGEN	UNLIQUIDAT	I T	J Г	AMOUNT OF CLAIM
Account No. 93ah 15057582			Medical	Т	T E D			
Ameripatch P.O. Box 404938 Atlanta, GA 30384		w			D			35.22
				$oxed{igspace}$	L	Ļ	_	35.22
Account No. 5491000063497635 Bank Of America Attn: Bankruptcy NC4-105-03-14 Po Box 26012 Greensboro, NC 27410		J	Opened 3/01/99 Last Active 1/28/11 CreditCard					
								753.00
Account No. 374879512 Business Revenue Syste Po Box 8986 Fort Wayne, IN 46898		J	Opened 6/01/09 CollectionAttorney Drs. Mori Bean Brooks P.A.					
								212.00
Account No. 4003441878428171 Capital One, N.a. Capital One Bank (USA) N.A. Po Box 30285 Salt Lake City, UT 84130		J	Opened 3/07/01 Last Active 10/20/10 CreditCard					0.00
						L		0.00
6 continuation sheets attached			(Total of t	Subt his j				1,000.22

In re	Gary William Myer,	Case No
	Melissa Michelle Myer	

		_		_		1.	·
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH-ZGEZ	Q U I	I S P U T E	AMOUNT OF CLAIM
Account No. 92783093131000920050826	1		Opened 8/01/05 Last Active 1/30/09	T	D A T E D		
Chela Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773		J	Educational		D		16,697.00
Account No. 92783093131001120051019			Opened 10/01/05 Last Active 5/07/08				
Chela Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773		J	Educational				1,692.00
Account No. 92783093131001020051019 Chela Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773		J	Opened 10/01/05 Last Active 5/07/08 Educational				1,638.00
Account No. 5424180500111270 Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195		н	Opened 4/01/00 Last Active 4/22/11 CreditCard				907.00
Account No. 23158712 Collection/Credit Collection services Po Box 9133 Needham, MA 02494	-	J	11 Comcast Cable				89.00
Sheet no. <u>1</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			21,023.00

In re	Gary William Myer,	Case No
	Melissa Michelle Myer	

	С	11.	akand Wife Isiat as Occasionity		1	T 5	<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXFLXGEX	LIQU	ISPUTE	AMOUNT OF CLAIM
Account No. 256182801			Opened 9/01/09	7	DATED		
Credit Coll/usa Ccusa 16 Distributor Dr. Suite 1 Morgantown, WV 26501		н	CollectionAttorney North Florida Gymnastics				140.00
Account No. 23x3056250			Medical	+	T		
Emergency Resource Group P.O. box 11349 Daytona Beach, FL 32120		w					
				┸			69.28
Account No. 6019180042183141 GEMB / HH Gregg Attention: Bankruptcy Po Box 103106 Roswell, GA 30076		н	Opened 4/07/02 Last Active 4/04/04 ChargeAccount				0.00
Account No. 5046620210473245	╁		Opened 11/26/00 Last Active 12/07/01	+	T		
GEMB / HH Gregg Attention: Bankruptcy Po Box 103106 Roswell, GA 30076		J	ChargeAccount				0.00
Account No. 601136107538	t		Opened 7/01/08 Last Active 6/14/11	+	\dagger	L	
Gemb/sams Club Dc Gemb Finance Po Box 103104 Roswell, GA 30076		J	CreditCard				3,016.00
Sheet no. 2 of 6 sheets attached to Schedule of	_			Sub	tota	ı al	2 225 22
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	3,225.28

In re	Gary William Myer,	Case No.	
	Melissa Michelle Myer		

				_	_	_	
CREDITOR'S NAME,		Hu	sband, Wife, Joint, or Community	18	U	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. 6032207220594386			Opened 5/23/98 Last Active 11/02/03]⊤	T		
Gemb/walmart Po Box 981400 El Paso, TX 79998	-	J	ChargeAccount		D		0.00
Account No. 5046620225368091			Opened 5/01/05 Last Active 8/19/09		Г		
Gemb/whitehall Attn: bankruptcy Po Box 103104 Roswell, GA 30076		н	ChargeAccount				0.00
Account No. 31000226126335	╁		Opened 3/01/04 Last Active 1/28/11	╁	┝	H	
Hfc - Usa Po Box 3425 Buffalo, NY 14240	-	J	CheckCreditOrLineOfCredit				2,812.00
Account No. 0347475			Medical	T			
Jacksonville Emergency Consultants 4311 Salisbury Rd. Jacksonville, FL 32216		w					53.33
Account No. 0348943	T	T	Medical	\top	Г	Г	
Jacksonville Emergency Consultants 4311 Salisbury Rd. Jacksonville, FL 32216		w					174.53
Sheet no. 3 of 6 sheets attached to Schedule of	_			Subt	tota	 .l	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				3,039.86

In re	Gary William Myer,	Case No.
	Melissa Michelle Myer	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	CO	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E N	L Q	ISPUTED	AMOUNT OF CLAIM
Account No. 8369			Medical	Т	T E D		
John Fetchero 2862 Country Club Blvd Orange Park, FL 32073		w					77.23
A	╀	L	One and 5/04/00	_	L		11.23
Account No. 10295465 NCO 2703 N Highway 75 Sherman, TX 75090		J	Opened 5/01/09 CollectionAttorney Orange Park Medical Center				
							271.00
Account No. J638253			Medical				
North Florida Anesthesia Consultants P.O. Box 830529 Birmingham, AL 35283		w					104.00
Account No. 78905779865	╁		Medical				104.00
North Florida Foot and Ankle Center 8825 Perimeter Park Blvd. Suite 401 Jacksonville, FL 32216		w					54.82
Account No. 179049878	\dagger		Medical				3.102
Orange Park Medical Center P.O. Box 99400 Louisville, KY 40269		w					173.00
Sheet no4 of _6 sheets attached to Schedule of				Sub	tots	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				680.05

In re	Gary William Myer,	Case No.
	Melissa Michelle Myer	

	16	11	shoul Wife Isint or Community	- 1		11	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	IM	N	д>_	S	AMOUNT OF CLAIM
Account No. 179071039	1		Medical		Т	DATED		
Orange Park Medical Center P.O. Box 99400 Louisville, KY 40269		w				ם		985.60
Account No. 77744	-		Medical					000.00
Orange Park Surgery Center 2050 Professional Center Dr. Orange Park, FL 32073		w						
								261.64
Account No. 8876 Pointe Medica Services 1996 Kingsley Ave Orange Park, FL 32073	_	w	Medical					115.16
Account No. 5121079610231968			Opened 3/01/96 Last Active 11/18/10					
Sears/cbna Po Box 6189 Sioux Falls, SD 57117		J	CreditCard					0.00
Account No. 450577540105			Opened 11/01/99 Last Active 3/09/11					5.00
Vystar Credit Union Attn: Bankruptcy Po Box 45085 Jacksonville, FL 32232		н	CheckCreditOrLineOfCredit					6,074.00
Sheet no5 of _6 sheets attached to Schedule of	1			S	ubt	ota	l l	
Creditors Holding Unsecured Nonpriority Claims			(To	tal of th	is 1	pag	e)	7,436.40

In re	Gary William Myer,	Case No.
	Melissa Michelle Myer	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ΪĊ	Ü	[
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	OD E B T O R	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UZLLQULDAFED	I L	AMOU	UNT OF CLAIM
Account No. 4703203020958445			Opened 8/01/93 Last Active 4/28/11	T	T			
Vystar Credit Union Po Box 18 Jacksonville, FL 32212		J	CreditCard		D		-	5,016.00
Account No. 4053675000426616	T		Opened 11/01/01 Last Active 4/28/11			T		
Vystar Credit Union Po Box 18 Jacksonville, FL 32212		н	CreditCard					
	ı							3,983.00
Account No. 450418974105	1		Opened 12/01/95 Last Active 4/28/11 CheckCreditOrLineOfCredit	t				
Vystar Credit Union Attn: Bankruptcy Po Box 45085 Jacksonville, FL 32232		J						
	l							3,753.00
Account No. 4703203020958650	╁		Opened 7/01/01 Last Active 6/10/11					
Vystar Credit Union		J	CreditCard					
Po Box 18 Jacksonville, FL 32212								
								2,084.00
Account No.	$\frac{1}{1}$							
Sheet no. 6 of 6 sheets attached to Schedule of	_		<u> </u>	Sub	tots	ı al	 	
Creditors Holding Unsecured Nonpriority Claims			(Total of					14,836.00
			(Report on Summary of So		Γota dule			51,240.81

B6G (Official Form 6G) (12/07)

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n	rΔ
	10

Gary William Myer, Melissa Michelle Myer

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Dish Network

Verizon Bankruptcy Administration PO Box 3397 Bloomington, IL 61702 **Satellite Contract**

Cell phone contracts

Case 3:11-bk-08356-JAF Doc 1 Filed 11/16/11 Page 29 of 58

B6H (Official Form 6H) (12/07)

In re	Gary William Myer,	Case No
	Melissa Michelle Myer	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

B6I (Offi	icial Form 6I) (12/07)
	Gary William Myer
In re	Melissa Michelle Myer

	Gary William Wyer		~	
n re	Melissa Michelle Myer		Case No.	
		-	='	

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	s Marital Status: DEPENDENTS OF DEBTOR AND SPOUSE					
Married	RELATIONSHIP(S): daughter daughter son	A	GE(S): 13 19 8			
Employment:	DEBTOR			SPOUSE		
Occupation	CADD Tech	Ultraso	und Te	ch.		
Name of Employer	Xorail			ledical Center		
How long employed	1 Years, 6 Months	5 Years				
Address of Employer	5011 Gate Parkway Building 100 Suite 400 Jacksonville, FL 32256			Avenue FL 32073		
	rage or projected monthly income at time case filed)			DEBTOR		SPOUSE
	ary, and commissions (Prorate if not paid monthly)		\$	3,257.96	\$ _	4,270.24
2. Estimate monthly overtime	e		\$	0.00	\$_	0.00
3. SUBTOTAL			\$	3,257.96	\$_	4,270.24
4. LESS PAYROLL DEDUC						
 a. Payroll taxes and soc 	cial security		\$	280.38	\$ _	900.33
b. Insurance			\$	0.00	\$	0.00
c. Union dues			\$	0.00	\$ _	0.00
d. Other (Specify)	See Detailed Income Attachment		\$	682.99	\$_	66.08
5. SUBTOTAL OF PAYROL	LL DEDUCTIONS		\$	963.37	\$_	966.41
6. TOTAL NET MONTHLY	TAKE HOME PAY		\$	2,294.59	\$_	3,303.83
7. Regular income from oper	ration of business or profession or farm (Attach detailed stat	ement)	\$	0.00	\$	0.00
8. Income from real property	1		\$	0.00	\$	0.00
9. Interest and dividends			\$	0.00	\$	0.00
dependents listed above		e or that of	\$	0.00	\$_	0.00
11. Social security or govern (Specify):	iment assistance		\$	0.00	\$	0.00
<u></u>			\$ 	0.00	\$ _	0.00
12. Pension or retirement inc	come		\$	0.00	\$ _	0.00
13. Other monthly income						
(Specify):			\$	0.00	\$_	0.00
			\$	0.00	\$_	0.00
14. SUBTOTAL OF LINES	7 THROUGH 13		\$	0.00	\$_	0.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)			\$	2,294.59	\$_	3,303.83
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)				\$	5,598	3.42

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

.

B6I (Official Form 6I) (12/07)

In re	Gary William Myer Melissa Michelle Myer		Case No.	
		Debtor(s)		

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Detailed Income Attachment

Other Payroll Deductions:

401K	\$	161.97	\$ 0.00
Dental	<u> </u>	12.92	\$ 0.00
HC Flex Spend	<u> </u>	76.92	\$ 0.00
Med/Dent	<u> </u>	216.92	\$ 0.00
Vision	\$	11.76	\$ 0.00
Spouse Sur	\$	92.30	\$ 0.00
401K Loan	\$	79.50	\$ 0.00
Life Ins	\$	13.84	\$ 10.20
Dep Life	\$	9.50	\$ 0.00
Long Term Dis	\$	7.36	\$ 7.08
CoCents	\$	0.00	\$ 48.80
Total Other Payroll Deductions	\$	682.99	\$ 66.08

B6J	(Official Form 6J) (12/07)
	Gary William Myor

	Gary William Myer	
In re	Melissa Michelle Myer	

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."	ete a separate	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,475.29
a. Are real estate taxes included? Yes X No		
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	250.00
b. Water and sewer	\$	90.00
c. Telephone	\$	45.00
d. Other See Detailed Expense Attachment	\$	338.00
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$	600.00
5. Clothing	\$	200.00
6. Laundry and dry cleaning	\$	25.00
7. Medical and dental expenses	\$	25.00
8. Transportation (not including car payments)	\$	550.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
10. Charitable contributions	\$	10.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	205.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) Property Tax	\$	89.08
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	355.28
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Child Day Care	\$	200.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	4,557.65
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	-	E E00 40
a. Average monthly income from Line 15 of Schedule I	\$	5,598.42
b. Average monthly expenses from Line 18 above	\$	4,557.65
c. Monthly net income (a. minus b.)	\$	1,040.77

B6J (Offi	icial Form 6J) (12/07) Gary William Myer		
In re	Melissa Michelle Myer	Case No.	
	Debtor(s)		
	SCHEDULE J - CURRENT EXPENDITURES OF I	NDIVIDUAL DEBTOR(S)	

Detailed Expense Attachment

Other Utility Expenditures:

Cable	\$	100.00
Internet	<u> </u>	38.00
Cell phones	\$	200.00
Total Other Utility Expenditures	\$	338.00

B6 Declaration (Official Form 6 - Declaration). (12/07)

Gary William Myer

Date November 16, 2011

United States Bankruptcy Court Middle District of Florida

In re	Melissa Michelle Myer			Case No.	
			Debtor(s)	Chapter	13
				·	
	DECLARATION C	ONCERN	ING DEBTOR'S SC	HEDULI	ES
	DECLARATION UNDER F	PENALTY C	F PERJURY BY INDIVI	DUAL DEE	BTOR
	I declare under penalty of perjury the sheets, and that they are true and correct to the				es, consisting of26
Date	November 16, 2011	Signature	/s/ Gary William Myer Gary William Myer Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

/s/ Melissa Michelle Myer
Melissa Michelle Myer

B7 (Official Form 7) (04/10)

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer Melissa Michelle Myer		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\$15,498.55	2011 Husband Xorail
\$32,878.29	2010 Husband Xorail
\$40,967.00	2009 Husband Xorail
\$22,727.23	2011 Wife Orange Park Medical Center
\$45,096.54	2010 Wife Orange Park Medical Center
\$41.522.00	2009 Wife Orange Park Medical Center

SOURCE

AMOUNT

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	
\$0.00	2011 Husband	Unemployment
\$900.00	2010 Husband	Unemployment
\$3,300.00	2009 Husband	Unemployment
\$0.00	2011 Husband	401k Disbursement
\$16,000.00	2010 Husband	401k Disbursement
\$40,037.00	2009 Husband	401k Disbursement

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS	DATES OF		AMOUNT STILL
OF CREDITOR	PAYMENTS	AMOUNT PAID	OWING
Wells Fargo Home Mortgage	04/12/2011, 05/17/2011,	\$4,425.87	\$172,339.89
P.O. Box 14411	06/15/2011		
Des Moines, IA 50306-3411			
Capital One Auto Finance	04/22/2011, 06/08/2001,	\$1,065.84	\$10,282.17
3905 North Dallas Prkwy	03/21/2011	. ,	•
Plano, TX 75093			

None

N

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

		111100111	
	DATES OF	PAID OR	
	PAYMENTS/	VALUE OF	AMOUNT STILL
NAME AND ADDRESS OF CREDITOR	TRANSFERS	TRANSFERS	OWING
		THE HOLLING	

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID AMOUNT STILL OWING

AMOUNT

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Refrigerator, Washer and Dryer, Television, Garage Door opener.

House was struck by lightning.

07/27/2010

Value: 3500.00

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYOR IF OTHER

AMOUNT OF MONEY OR DESCRIPTION AND VALUE

THAN DEBTOR

OF PROPERTY 762.90

TCCF

3350 Northwest 53rd St. Value:

Suite 103

Ft. Lauderdale, FL 33309

6/20/11

1546.00

LaBella Law. P.L. 1665 Kingsley Avenue Suite 108

Orange Park, FL 32073

30.00 www.a123cc.org

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DATE(S) OF DEVICE TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

_

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

NOTICE

LAW

GOVERNMENTAL UNIT

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101. None

NAME

NAME **ADDRESS**

7

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

ADDRESS NAME

DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 16, 2011 /s/ Gary William Myer Signature **Gary William Myer** Debtor Date November 16, 2011 /s/ Melissa Michelle Myer Signature Melissa Michelle Myer

Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B 201A (Form 201A) (12/09)

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

Gary William Myer

United States Bankruptcy Court Middle District of Florida

In re	Melissa Michelle Myer		Case No.	
		Debtor(s) Chapter	13
			CONSUMER DEBTOR NKRUPTCY CODE	R(S)
	\mathbf{C}	ertification of l	Debtor	
	I (We), the debtor(s), affirm that I (we) have red	ceived and read th	ne attached notice, as required	by § 342(b) of the Bankruptcy
Code.				
-	William Myer sa Michelle Myer	X /s	/ Gary William Myer	November 16, 2011
Printed	d Name(s) of Debtor(s)	S	ignature of Debtor	Date
Case N	No. (if known)	Х / s	/ Melissa Michelle Myer	November 16, 2011
		S	ignature of Joint Debtor (if any) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer Melissa Michelle Myer		Case No.
		Debtor(s)	Chapter 13
	VERIF	FICATION OF CREDITOR	MATRIX
he ab	ove-named Debtors hereby verify tha	t the attached list of creditors is true and	correct to the best of their knowledge.
		/s/ Gary William Myer	
Date:	November 16, 2011	Gary William Myer	
		Signature of Debtor	
Date:	November 16, 2011	/s/ Melissa Michelle Myer	
		Melissa Michelle Myer	

Gary William Myer 2939 Biloxi Trail Middleburg, FL 32068 Chela Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773 Gemb/whitehall Attn: bankruptcy Po Box 103104 Roswell, GA 30076

Melissa Michelle Myer 2939 Biloxi Trail Middleburg, FL 32068

Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195 HFC P.O.Box 3425 Buffalo, NY 14240

John J. Freeman LaBella Law, P.L. 1665 Kingsley Avenue Suite 108 Orange Park, FL 32073 CitiCards P.O. Box 6500 Sioux Fall, SD 57117

Hfc - Usa Po Box 3425 Buffalo, NY 14240

Ameripatch P.O. Box 404938 Atlanta, GA 30384 Collection/Credit Collection services Po Box 9133 Needham, MA 02494

Internal Revenue Service PO Box 16236 Philadelphia, PA 19114-0236

Bank of America P.O. Box 15026 Wilmington, DE 19850 Credit Coll/usa Ccusa 16 Distributor Dr. Suite 1 Morgantown, WV 26501 Jacksonville Emergency Consultant 4311 Salisbury Rd. Jacksonville, FL 32216

Bank Of America Attn: Bankruptcy NC4-105-03-14 Po Box 26012 Greensboro, NC 27410 Emergency Resource Group P.O. box 11349 Daytona Beach, FL 32120 John Fetchero 2862 Country Club Blvd Orange Park, FL 32073

Business Revenue Syste Po Box 8986 Fort Wayne, IN 46898 GEMB / HH Gregg Attention: Bankruptcy Po Box 103106 Roswell, GA 30076 NCO 2703 N Highway 75 Sherman, TX 75090

Capital One Auto Finance 3905 N Dallas Pkwy Plano, TX 75093 Gemb/sams Club Dc Gemb Finance Po Box 103104 Roswell, GA 30076 North Florida Anesthesia Consultan P.O. Box 830529 Birmingham, AL 35283

Capital One, N.a. Capital One Bank (USA) N.A. Po Box 30285 Salt Lake City, UT 84130 Gemb/walmart Po Box 981400 El Paso, TX 79998 North Florida Foot and Ankle Cen 8825 Perimeter Park Blvd. Suite 401 Jacksonville, FL 32216 Orange Park Medical Center P.O. Box 99400 Louisville, KY 40269 Vystar Credit Union Po Box 18 Jacksonville, FL 32212

Orange Park Surgery Center 2050 Professional Center Dr. Orange Park, FL 32073

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

Pointe Medica Services 1996 Kingsley Ave Orange Park, FL 32073

Sally Mae P.O. Box 9532 Wilkes-Barre, PA 18773

Sears/cbna Po Box 6189 Sioux Falls, SD 57117

Vystar Credit Union P.O. Box 45085 Jacksonville, FL 32232

Vystar Credit Union P.O. Box 45085 Jacksonville, FL 32223

Vystar Credit Union P.O. Box 44068 Jacksonville, FL 32231

Vystar Credit Union Attn: Bankruptcy Po Box 45085 Jacksonville, FL 32232

United States Bankruptcy Court Middle District of Florida

In re	Gary William Myer Melissa Michelle Myer		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OI	F COMPENSATION OF ATTORN	NEY FOR DI	EBTOR(S)
С	compensation paid to me within one year	Bankruptcy Rule 2016(b), I certify that I am r before the filing of the petition in bankruptcy, contemplation of or in connection with the bankr	or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to a	accept	\$	3,500.00
	Prior to the filing of this statement I	have received	\$	949.00
	Balance Due		\$	2,551.00
2. \$	S 281.00 of the filing fee has been p	paid.		
3. Т	The source of the compensation paid to n	ne was:		
	■ Debtor □ Other (specify	y):		
4. Т	The source of compensation to be paid to	o me is:		
	■ Debtor □ Other (specify	y):		
5. I	■ I have not agreed to share the above-	disclosed compensation with any other person un	less they are mem	bers and associates of my law firm.
I		losed compensation with a person or persons who a list of the names of the people sharing in the co		
6. l	In return for the above-disclosed fee, I ha	ave agreed to render legal service for all aspects of	of the bankruptcy of	ease, including:
b c	Preparation and filing of any petition,Representation of the debtor at the me	ation, and rendering advice to the debtor in determ schedules, statement of affairs and plan which meeting of creditors and confirmation hearing, and	ay be required;	
d	reaffirmation agreements a	creditors to reduce to market value; exem nd applications as needed; preparation a of liens on household goods.	nption planning nd filing of mot	; preparation and filing of ions pursuant to 11 USC
7. E		ve-disclosed fee does not include the following soors in any dischargeability actions, judicial eding.		es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete sankruptcy proceeding.	statement of any agreement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in
Dated	: November 16, 2011	/s/ John J. Freemar	1	
		John J. Freeman 58	3618	
		LaBella Law, P.L. 1665 Kingsley Aver	nue	
		Suite 108	072	
		Orange Park, FL 32 904-541-1643 Fax:		
		bk@labellalaw.com	1	

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B22C (Official Form 22C) (Chapter 13) (12/10)

	·	
	Gary William Myer	According to the calculations required by this statement:
In re	Melissa Michelle Myer	☐ The applicable commitment period is 3 years.
C N	Debtor(s)	■ The applicable commitment period is 5 years.
Case Number: (If known)		■ Disposable income is determined under § 1325(b)(3).
	(II Kilowii)	☐ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME							
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.							
	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income	ne'') for Lines 2-10	'•					
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	Column A Debtor's Income	Column B Spouse's Income					
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 3,369.79	\$ 4,258.32					
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.							
	Debtor Spouse							
	a. Gross receipts \$ 0.00 \$ 0.00							
	b. Ordinary and necessary business expenses \$ 0.00 \$ 0.00 c. Business income Subtract Line b from Line a	\$ 0.00	\$ 0.00					
4	the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse							
	a. Gross receipts \$ 0.00 \$ 0.00 b. Ordinary and necessary operating expenses \$ 0.00 \$ 0.00							
		\$ 0.00	\$ 0.00					
5	Interest, dividends, and royalties.	\$ 0.00	\$ 0.00					
6	Pension and retirement income.	\$ 0.00	\$ 0.00					
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. \$ 0.00 \$							
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:							
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00	\$ 0.00	\$ 0.00					

Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s). Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	9.79 \$	0.00 4,258.32 7,628.11			
b. Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s). Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	9.79 \$	4,258.32			
Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s). Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	9.79 \$	4,258.32			
the total. If Column B has not been completed, enter the amount from Line 10, Column A.	ф	7,628.11			
Down H. CALCUL ATION OF \$ 1225(b)(4) COMMITMENT DEDIOD	- C				
Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD	Φ.				
12 Enter the amount from Line 11	\$	7,628.11			
Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. S	e				
Total and enter on Line 13	\$	0.00			
14 Subtract Line 13 from Line 12 and enter the result.	\$	7,628.11			
Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$	91,537.32			
Applicable median family income. Enter the median family income for applicable state and household size. (The information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
a. Enter debtor's state of residence: FL b. Enter debtor's household size: 5	\\$	70,242.00			
top of page 1 of this statement and continue with this statement.	 □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" 				
Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME					
18 Enter the amount from Line 11.	\$	7,628.11			
Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a.					
Total and enter on Line 19.	\$	0.00			
20 Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	7,628.11			

21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.			20 by the number 12 and	\$	91,537.32		
22	Applicable median family income. Enter the amount from Line 16.				\$	70,242.00		
	Applic	eation of § 1325(b)(3). Che	ck the applicable box ar	nd pro	ceed as directed.		1.	· ·
23	■ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is detern 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.					ined u	nder §	
		☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete						
		Part IV. C	ALCULATION ()F I	DEDUCTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ds of the Internal Reve	enue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			Expenses for the om the clerk of the see allowed as exemptions ou support.	\$	1,639.00		
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	Perso	ns under 65 years of age		Pers	ons 65 years of age or old	ler		
	a1.	Allowance per person	60	a2.	Allowance per person	144		
	b1.	Number of persons	5	b2.	Number of persons	0		
	c1.	Subtotal	300.00	c2.	Subtotal	0.00	\$	300.00
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.				his information is e family size consists of	\$	542.00	
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any							
		1				1,361.00		
		home, if any, as stated in L	ine 47	y you	\$	1,485.00		
		Net mortgage/rental expen			Subtract Line b fr		\$	0.00
26	25B do Standa	Standards: housing and upperson accurately computered, enter any additional artion in the space below:	the allowance to which	you a	re entitled under the IRS I	Housing and Utilities	¢	0.00
	l						\$	0.00

	Local Standards: transportation; vehicle operation/public transportation					
	expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.					
	Check the number of vehicles for which you pay the operating expen	ses or for which the operating expenses are				
27A	included as a contribution to your household expenses in Line 7.					
	If you checked 0, enter on Line 27A the "Public Transportation" amo					
	Transportation. If you checked 1 or 2 or more, enter on Line 27A the	e "Operating Costs" amount from IRS Local				
	Standards: Transportation for the applicable number of vehicles in th Census Region. (These amounts are available at www.usdoj.gov/ust/		\$	488.00		
	Local Standards: transportation; additional public transportation		Ψ			
27B	for a vehicle and also use public transportation, and you contend that	you are entitled to an additional deduction for				
2/10	your public transportation expenses, enter on Line 27B the "Public T Standards: Transportation. (This amount is available at www.usdoj.g					
	court.)	or nom the elerk of the bankruptey	\$	0.00		
	Local Standards: transportation ownership/lease expense; Vehicl					
	you claim an ownership/lease expense. (You may not claim an owner	rship/lease expense for more than two				
	vehicles.) ■ 1 □ 2 or more.	- IDC I l Ct ll T				
	Enter, in Line a below, the "Ownership Costs" for "One Car" from th (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy					
28	Monthly Payments for any debts secured by Vehicle 1, as stated in L					
	the result in Line 28. Do not enter an amount less than zero.	f 406 00				
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$ 496.00				
	b. 1, as stated in Line 47	\$ 171.58	_			
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	324.42		
	Local Standards: transportation ownership/lease expense; Vehicl the "2 or more" Box in Line 28.	e 2. Complete this Line only if you checked				
	Enter, in Line a below, the "Ownership Costs" for "One Car" from th	e IRS Local Standards: Transportation				
	(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy	court); enter in Line b the total of the Average				
29	Monthly Payments for any debts secured by Vehicle 2, as stated in L the result in Line 29. Do not enter an amount less than zero.	ine 47; subtract Line b from Line a and enter				
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00				
	Average Monthly Payment for any debts secured by Vehicle	¢ 0.00				
	b. 2, as stated in Line 47	\$ 0.00	\$			
		c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.				
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social					
	security taxes, and Medicare taxes. Do not include real estate or sales taxes.					
		ncome taxes, self employment taxes, social	\$	0.00 1,180.71		
21	security taxes, and Medicare taxes. Do not include real estate or sal Other Necessary Expenses: involuntary deductions for employme	es taxes. ent. Enter the total average monthly				
31	other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory	es taxes, self employment taxes, social es taxes. ent. Enter the total average monthly retirement contributions, union dues, and	\$	1,180.71		
31	other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary deductions that are required for your employment, such as woluntary amounts, such as voluntary amounts, such as voluntary amounts.	es taxes, self employment taxes, social es taxes. ent. Enter the total average monthly retirement contributions, union dues, and entary 401(k) contributions.				
31	Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary expenses: life insurance. Enter total average more	es taxes. ent. Enter the total average monthly retirement contributions, union dues, and entary 401(k) contributions. enthly premiums that you actually pay for term	\$	1,180.71		
	other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary deductions that are required for your employment, such as woluntary amounts, such as voluntary amounts, such as voluntary amounts.	es taxes. ent. Enter the total average monthly retirement contributions, union dues, and entary 401(k) contributions. enthly premiums that you actually pay for term	\$	1,180.71		
32	Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu Other Necessary Expenses: life insurance. Enter total average mor life insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total security of the payments.	est taxes, self employment taxes, social est taxes. ent. Enter the total average monthly retirement contributions, union dues, and entary 401(k) contributions. enthly premiums that you actually pay for term e on your dependents, for whole life or for tall monthly amount that you are required to	\$	1,180.71 0.00		
	Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary expenses: life insurance. Enter total average more life insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total pay pursuant to the order of a court or administrative agency, such as	est taxes, self employment taxes, social est taxes. ent. Enter the total average monthly retirement contributions, union dues, and entary 401(k) contributions. enthly premiums that you actually pay for term e on your dependents, for whole life or for tall monthly amount that you are required to	\$ \$	1,180.71 0.00 24.04		
32	Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntiform costs. Do not include discretionary amounts, such as voluntification of yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.	est taxes. ent. Enter the total average monthly retirement contributions, union dues, and untary 401(k) contributions. enthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to a spousal or child support payments. Do not	\$	1,180.71 0.00		
32	Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntiform costs. Do not include discretionary amounts, such as voluntification of the Necessary Expenses: life insurance. Enter total average more life insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total payments of payments of a court or administrative agency, such as include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a ph	es taxes. Int. Enter the total average monthly retirement contributions, union dues, and untary 401(k) contributions. Inthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to a spousal or child support payments. Do not expectably or mentally challenged child. Enter	\$ \$	1,180.71 0.00 24.04		
32	Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntiform costs. Do not include discretionary amounts, such as voluntiform costs. Do not include discretionary amounts, such as voluntification of yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total payments of a court or administrative agency, such as include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a photo total average monthly amount that you actually expend for educate education that is required for a physically or mentally challenged dependence.	es taxes. Int. Enter the total average monthly retirement contributions, union dues, and untary 401(k) contributions. Inthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to a spousal or child support payments. Do not expisically or mentally challenged child. Entertion that is a condition of employment and for	\$ \$ \$	1,180.71 0.00 24.04 0.00		
32	Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntife insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a phother total average monthly amount that you actually expend for educated education that is required for a physically or mentally challenged depproviding similar services is available.	es taxes. Int. Enter the total average monthly retirement contributions, union dues, and untary 401(k) contributions. Inthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to a spousal or child support payments. Do not expressed by the second of the spousal or child support payments. The second of the spousal or child support payments. The second of the spousal or child support payments. The second of the spousal or child support payments and for second of the seco	\$ \$	1,180.71 0.00 24.04		
32	Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntiform costs. Do not include discretionary amounts, such as voluntiform costs. Do not include discretionary amounts, such as voluntification of yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total payments of a court or administrative agency, such as include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a photo total average monthly amount that you actually expend for educate education that is required for a physically or mentally challenged dependence.	es taxes. Int. Enter the total average monthly retirement contributions, union dues, and intary 401(k) contributions. Inthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to a spousal or child support payments. Do not expressed to the expressed of the property of the expressed of th	\$ \$ \$	1,180.71 0.00 24.04 0.00		

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$	0.00	
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$	38.00	
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	4,536.17	
	Subpart B: Additional Living Expense Deductions			
	Note: Do not include any expenses that you have listed in Lines 24-37			
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.			
39	a. Health Insurance \$ 318.52			
	b. Disability Insurance \$ 0.00			
	c. Health Savings Account \$ 14.22		000 74	
	Total and enter on Line 39	\$	332.74	
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:			
	<u></u>			
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$	0.00	
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you			
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local			
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	0.00	
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00	
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$	0.00	
	1			

				Subpart C: Deductions for De	bt]	Payment			
47	or cl so ca	wn, neck ched ase,	list the name of creditor, identic whether the payment includes luled as contractually due to each	fy the property securing the debt, state to taxes or insurance. The Average Month the Secured Creditor in the 60 months for tadditional entries on a separate page.	he A lly F llov	Average Monthly Payment is the towning the filing of	Payment, and tal of all amounts the bankruptcy		
			Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance		
		a.	Capital One Auto Finance	Auto: 2003 Ford Mustang GT. vehicle is in clean condition with 77,000 miles. Location: 2939 Biloxi Trail Middleburg, FL 32068	\$	171.58	_		
		b.	Wells Fargo Hm Mortgag	Residence: Single Family Home Location: 2939 Biloxi Trail Middleburg, FL 32068	\$	1,485.00	■yes □no		
					T	otal: Add Lines		\$	1,656.58
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount				ou may include in ion to the uld include any such amounts in				
				Residence: Single Family Hom Location: 2939 Biloxi Trail	е				
		a.	Wells Fargo Hm Mortgag	Middleburg, FL 32068		\$	24.75		
	-						Total: Add Lines	\$	24.75
49	pı	riori		laims. Enter the total amount, divided by claims, for which you were liable at the chast hose set out in Line 33.				\$	43.11
			ter 13 administrative expense ing administrative expense.	s. Multiply the amount in Line a by the	amo	ount in Line b, a	nd enter the		
50	а		Projected average monthly (\$		2,674.88		
30	t).	issued by the Executive Offi	listrict as determined under schedules ce for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of	X		7.40		
	C	·.		tive expense of chapter 13 case		otal: Multiply Li		\$	197.94
51	Т	otal	Deductions for Debt Paymen	t. Enter the total of Lines 47 through 5	0.			\$	1,922.38
	•			Subpart D: Total Deductions f	ron	n Income		•	
52	Т	otal	of all deductions from incom	e. Enter the total of Lines 38, 46, and 5	1.			\$	6,791.29
	1		Part V. DETERMI	NATION OF DISPOSABLE I	NO	COME UNDI	ER § 1325(b)(2	2)	
53	Т	otal	current monthly income. En	ter the amount from Line 20.			. / \	\$	7,628.11
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability				\$	0.00			
55	W	age		Enter the monthly total of (a) all amount retirement plans, as specified in § 541(b fied in § 362(b)(19).				f \$	161.97
56	+			ler § 707(b)(2). Enter the amount from	Lin	ne 52.		\$	6,791.29
	Total of all deductions allowed allowed 3, 10, (0)(2). Effect the allount from Effect 52.			Ψ.	-,				

	there If ne prov	is no reasonable alternative, describe the special circumst cessary, list additional entries on a separate page. Total the ide your case trustee with documentation of these expe e special circumstances that make such expense necessary.	tances and the resulting of expenses and enter the nses and you must prov	expenses in lines a-c below. total in Line 57. You must	
57		Nature of special circumstances	Amount	of Expense	
	a.		\$		
	b.		\$		
	c.		\$		
			Total: A	Add Lines	\$ 0.00
58	Tota resul	l adjustments to determine disposable income. Add the t.	amounts on Lines 54, 5	5, 56, and 57 and enter the	\$ 6,953.26
Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.			l enter the result.	\$ 674.85	

Part VI. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

60

61

	Expense Description	Monthly Amount
a.	401K Loan	\$ 79.50
b.		\$
c.		\$
d.		\$
	Total: Ac	d Lines a. b. c and d \$ 79.50

Part VII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)

Date: November 16, 2011 Signature: /s/ Gary William Myer

Gary William Myer (Debtor)

(Debto

Date: November 16, 2011 Signature /s/ Melissa Michelle Myer

Melissa Michelle Myer (Joint Debtor, if any)

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Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **05/01/2011** to **10/31/2011**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Xorail

Income by Month:

6 Months Ago:	05/2011	\$2,989.21
5 Months Ago:	06/2011	\$2,776.71
4 Months Ago:	07/2011	\$4,370.19
3 Months Ago:	08/2011	\$3,357.71
2 Months Ago:	09/2011	\$3,466.96
Last Month:	10/2011	\$3,257.96
	Average per month:	\$3,369.79

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **05/01/2011** to **10/31/2011**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Orange Park Medical

Income by Month:

6 Months Ago:	05/2011	\$3,715.31
5 Months Ago:	06/2011	\$3,691.97
4 Months Ago:	07/2011	\$4,015.03
3 Months Ago:	08/2011	\$3,905.08
2 Months Ago:	09/2011	\$5,952.28
Last Month:	10/2011	\$4,270.24
	Average per month:	\$4,258.32